

05-11-01

PATENT  
CUSTOMER NO. 24,950

05/10/01  
1c845 U.S. PTO

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Tabatabaie et al. ) Dkt. No.: OKL010-105/00359A  
Serial No.: Not Yet Assigned )  
Filed: Herewith )  
For: PREVENTION OF INSULIN-DEPENDENT )  
DIABETES, COMPLICATION THEREOF, )  
OR ALLOGRAFT REJECTION BY INHIBITION )  
OF CYCLOOXYGENASE-2 ACTIVITY )

1c997 U.S. PTO  
09/852587  
05/10/01

BOX PATENT APPLICATION  
Director - US Patent & Trademark Office  
Washington, D.C. 20231

TRANSMITTAL LETTER FOR PATENT APPLICATION

Sir

Pursuant to 35 U.S.C. §21(a) as amended by Public Law 97-247 and 37 C.F.R. §1.10, transmitted herewith for filing is the above-referenced utility patent application **based upon US Provisional 60/203,572, filing date May 11, 2000.**

Enclosed are:

- [X] 9 sheets of formal drawings
- [X] 36 pages of specification (including Title Page & Abstract)
- [X] 4 pages of claims
- [X] 4 pages of the Declaration and Power of Attorney
- [X] Assignment to Oklahoma Medical Research Foundation
- [X] Power of Attorney/Agent from Assignee along with Cert. 3.73(b)
- [X] Information Disclosure Statement along with PTO 1449 form and copies of cited references.
- [X] Applicants and Assignee qualify for Small Entity Status.

[ ] Request and Certification that the attached application not be published.

[X] Pre-addressed postal card.

Express Mail No.: EL555989795US

Date: May 10, 2001

Applicants: Tabatabaie et al.

USSN: Not Yet Assigned

Filing Date: Herewith

PREVENTION OF INSULIN-DEPENDENT DIABETES, COMPLICATIONS THEREOF,  
OR ALLOGRAFT REJECTION BY INHIBITION OF CYCLOOXYGENASE-2 ACTIVITY

Dkt. No.: OKL010-105/00359A

All correspondence concerning this application should be mailed to:

Daniel S. Hodgins, Reg. No. 31,026  
HEAD, JOHNSON & KACHIGIAN  
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Oklahoma City, OK 73102

The filing fee has been calculated as shown below:

	<u>SMALL</u> <u>ENTITY</u>			<u>OTHER THAN</u> <u>SMALL ENTITY</u>		
	No. Filed	No. Extra	Basic Rate	Fee	Basic Rate	Fee
For				\$ 355		\$ 710
Total Claims	23	- 20 = 3	X \$ 9 =	27	X \$ 18 =	
Indep Claims	9	- 3 = 6	X \$ 40 =	240	X \$ 80 =	
Multiple Dep. Claim			X \$ 135 =	—	X \$ 270 =	
			TOTAL	\$ 622.00		\$ _____

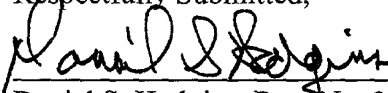
☒ The following fees are paid by enclosed check:

Filing Fee of \$622.00 and for the assignment recordation fee of \$40.00 for a total of \$662.00.

☒ Enclosed is a Check in the amount of \$710.00.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment under 37 C.F.R. 1.16 and 1.17 to PTO Deposit Account No. 08-1500. One copy of this transmittal is attached.

Respectfully Submitted,



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